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DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

**METHODS AND PRODUCTS FOR REGULATING LECTIN COMPLEMENT
PATHWAY ASSOCIATED COMPLEMENT ACTIVATION**

the specification of which was filed on December 15, 1999 as United States
Application No. 09/464,303.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or section 365(a) of any PCT International application designating at least one country other than the United States listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed:

Prior Foreign PCT International Application(s) and any priority claims under 35 U.S.C. §119 and §365(a), (b):

(Number)	(Country-if PCT, so indicate)	(DD/MM/YY Filed)	Priority Claimed	
			<input type="checkbox"/>	<input type="checkbox"/>
			YES	NO
(Number)	(Country-if PCT, so indicate)	(DD/MM/YY Filed)	<input type="checkbox"/>	<input type="checkbox"/>
			YES	NO
(Number)	(Country-if PCT, so indicate)	(DD/MM/YY Filed)	<input type="checkbox"/>	<input type="checkbox"/>
			YES	NO

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

<u>60/112,390</u>	<u>12/15/98</u>
(Application Number)	(filing date)
<u> </u>	<u> </u>
(Application Number)	(filing date)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT International application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35,

United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56

which became available between the filing date of the prior application and the national or PCT International filing date of this application:

(Application No.)	(filing date)	(status-patented, pending, abandoned)
(Application No.)	(filing date)	(status-patented, pending, abandoned)

PCT International Applications designating the United States:

(PCT Appl. No.)	(U.S. Ser. No.)	(PCT filing	status-patented, pending, abandoned)
-----------------	-----------------	-------------	--------------------------------------

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Robert M. Abrahamsen	40,886	Jason M. Honeyman	31,624	Stanley Sacks	19,900
John N. Anastasi	37,765	Ronald J. Kransdorf	20,004	Christopher S. Schultz	37,929
Gary S. Engelson	35,128	Peter C. Lando	34,654	Alan B. Sherr	42,147
Neil P. Ferraro	39,188	Helen C. Lockhart	39,248	Robert A. Skrivaneck, Jr.	41,316
Thomas G. Field	P-45,596	Matthew B. Lowrie	38,228	Paul D. Sorkin	39,039
Stephen R. Finch	42,534	William R. McClellan	29,409	Alan W. Steele	45,128
Edward R. Gates	31,616	Daniel P. McLoughlin	P-46,066	Mark Steinberg	40,828
Richard F. Giunta	36,149	James H. Morris	34,681	Joseph Teja, Jr.	45,157
Peter J. Gordon	35,164	M. Lawrence Oliverio	30,915	John R. Van Amsterdam	40,212
John C. Gorecki	38,471	Timothy J. Oyer	36,628	Michael G. Verga	39,410
William G. Gosz	27,787	Edward F. Perlman	28,105	Robert H. Walat	P-46,324
Lawrence M. Green	29,384	Michael J. Pomianek	P-46,190	Lisa E. Winsor	44,405
George L. Greenfield	17,756	Elizabeth R. Plumer	36,637	David Wolf	17,528
James M. Hanifin, Jr.	39,213	Randy J. Pritzker	35,986	Douglas R. Wolf	36,971
Therese A. Hendricks	30,389	Robert E. Rigby, Jr.	36,904	Ivan D. Zitkovsky	37,482
Steven J. Henry	27,900	Edward J. Russavage	43,069		

Address all telephone calls to Helen C. Lockhart at telephone no. (617) 720-3500.
Address all correspondence to:

Helen C. Lockhart
c/o Wolf, Greenfield & Sacks, P.C.,
Federal Reserve Plaza
600 Atlantic Avenue
Boston, MA 02210-2211

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Gregory L. Stahl
Inventor's signature
Full name of first inventor Gregory L. Stahl
Citizenship US
Residence) 290 Chestnut Street, Clinton, MA 01510
Post Office Address same as above

2-16-00
Date

Charles D. Collard
Inventor's signature
Full name of first inventor Charles D. Collard
Citizenship US
Residence) 52 Oakridge Road, Wellesley, MA 02481
Post Office Address same as above

2-16-00
Date

03-17-2000

Express Mail Label No. EV 292458965US
Date of Deposit: January 28, 2004
Docket No. A0752.70001US01

101291880

**RECORDATION FORM COVER SHEET
PATENTS ONLY**

FORM PTO-1595

(Rev. 6-93)

OMB No. 0651-0011 (exp. 4/94)

U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office

To the Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Gregory L. Stahl and Charles D. Collard

Additional name(s) of conveying party(ies) attached? [] Yes [X] No

3. Nature of conveyance:

☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Other _____Execution Date: ~~1/3/00~~ 1/18/00

2. Name and address of receiving party(ies)

Name: The Brigham and Women's Hospital, Inc.
75 Francis St.
Boston, MA 02115

Additional name(s) & addresses(es) attached? [] Yes [X] No

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is

A. Patent Application No.(s)

09/464,303

B. Patent No.(s)

Additional numbers attached? [] Yes [X] No

5. Name and address of party to whom correspondence
Concerning document should be mailed:Name: Helen C. Lockhart
Address: WOLF, GREENFIELD & SACKS, P.C.
Federal Reserve Plaza
600 Atlantic Avenue
Boston, MA 02210

6. Total number of applications and patents involved: [1]

7. Total fee (37 CFR 3.41).....\$ 40.00

☒ Enclosed☐ Authorized to be charged to deposit account

The Commissioner is authorized to charge:

8. Deposit Account No: 23/2825

03/15/2000 DC0ATES 00000108 09464303

01 FC:581

40.00 BP

DO NOT USE THIS SPACE

9. Statement and signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Helen C. Lockhart - Reg. No. 39,248,

February 10, 2000

Name of Person Signing

Signature

Date

Total number of pages including cover sheet, attachments, and document: [3]

ASSIGNMENT

In consideration of One Dollar (\$1.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, we the undersigned Gregory L. Stahl and Charles D. Collard hereby


Sell, assign and transfer to The Brigham and Women's Hospital, Inc., a Massachusetts corporation having a place of business at 75 Francis Street, Boston, MA 02115, its successors, assigns and legal representatives, all hereinafter referred to as the Assignee, the entire right, title and interest for the United States and all foreign countries, in and to any and all inventions which are disclosed in the provisional patent application filed in the United States Patent and Trademark Office on December 15, 1998, under provisional Serial No. 60/112,390 and entitled METHODS AND PRODUCTS FOR REGULATING LECTIN COMPLEMENT PATHWAY ASSOCIATED COMPLEMENT ACTIVATION and United States Letters Patent filed in the United States Patent and Trademark Office on December 15, 1999 under Serial No. 09/464,303 and entitled METHODS AND PRODUCTS FOR REGULATING LECTIN COMPLEMENT PATHWAY ASSOCIATED COMPLEMENT ACTIVATION, and in and to said application and all divisional, continuing, substitute, renewal, reissue and all other applications for Letters Patent which have been or shall be filed in the United States and all foreign countries on any of said inventions; and in and to all original and reissued patents which have been or shall be issued in the United States and all foreign countries on said inventions including the right to apply for patent rights in each foreign country and all rights to priority.

We agree that said Assignee may apply for and receive Letters Patent for said inventions in its own name; and when requested, without charge to but at the expense of said Assignee, we agree to carry out in good faith the intent and purpose of this assignment, by executing all divisional, continuing, substitute, renewal, reissue, and all other patent applications on any and all said inventions, by executing all rightful oaths, assignments, powers of attorney and other papers, by communicating to said Assignee all facts known to us relating to said inventions and the history thereof, and generally by doing everything possible which said Assignee shall consider desirable for aiding in securing and maintaining proper patent protection for said inventions and for vesting title to said inventions and all applications for patents and all patents on said inventions, in said Assignee.

We hereby request the Honorable Commissioner of Patents and Trademarks to issue said Letters Patent to said Assignee.

We covenant with said Assignee that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by us and that full right to convey the same as herein expressed is possessed by us.

Date 1-18-00


Gregory L. Stahl

STATE OF MA. :
COUNTY OF Suffolk :

Subscribed and sworn to before me this 18 day of JANUARY

SEAL James A. Webster
Notary Public

My Commission Expires _____

JAMES A. WEBBER, JR.
NOTARY PUBLIC
My Commission Expires September 18, 2003

1/18/00
Date

Charles D. Collard
Charles D. Collard

STATE OF Ma. :
COUNTY OF Surrey :

Subscribed and sworn to before me this 18 day of January.

SEAL James A. Webber, Jr.
Notary Public
My Commission Expires _____

JAMES A. WEBBER, JR.
NOTARY PUBLIC
My Commission Expires September 18, 2003

Budapest Treaty Deposits**American Type Culture Collection**

10801 University Blvd., Manassas, VA 20110-2209 Tel. (703) 365-2700; Fax (703) 365-2745

**TO DEPOSIT OR TO CONVERT A DEPOSIT TO MEET THE REQUIREMENTS OF BUDAPEST TREATY ON THE
INTERNATIONAL RECOGNITION OF THE DEPOSIT OF MICROORGANISMS FOR THE
PURPOSES OF PATENT PROCEDURE****ALL QUESTIONS MUST BE COMPLETED. PLEASE USE ONE FORM PER EACH STRAIN DEPOSITED.**

1. Name of deposit (If microorganism, complete scientific name including genus and species and source of material; If virus, name and whether or not plant or animal and source including geographic location; if cell line, provide tissue & species, geographical source of isolation and any known hazards associated (e.g. HIV, EBV, etc.); if genetic materials, name of organism from which vector, clone or library is derived, source of the DNA insert identified by species (e.g. human, mouse) or scientific name and provide name of gene and identity of the host organism.)

3F8 Hybridoma - Mouse anti-human mannose binding lectin antibody

2. Strain designation (i.e., number, symbols, etc). 3F8

*The strain designation must correspond with the vial labels.

3. Is this an original deposit under the Budapest Treaty? Yes

4. Is this a request for a conversion of a deposit already at the ATCC to meet the requirements of the Budapest Treaty? If so, please indicate ATCC designation. No

5. Is this deposit a mixture of microorganisms or cells? No

6. Provide details necessary to cultivate, test for viability and store deposit. If mixture, provide description of components and a method to check presence. (If plasmid, provide name of host & antibiotic resistance). See attachment

7. Provide sufficient description so that ATCC may confirm deposit properties (e.g., Gram negative rod) Mouse IgG1k isotype

a. If deposit is a cell culture, is it being cultured in the presence of antibiotics? If so, please list the antibiotics.

b. If deposit is hybridoma, what is the isotype of antibody produced? IgG1k

8. Is this strain hazardous to humans? No, animals? No, plants? No. If yes, what is the recommended biosafety

level for working with this strain _____ (Ref. Guidelines for Research Involving Recombinant DNA Molecules, NIH Guidelines, January 1996) [www.nih.gov/od/orda/toc.htm]

9. Availability: Prior to issuance of a U.S. Patent, ATCC will only make a culture available as instructed by the depositor or relevant patent office. Samples must be provided to a specific investigator if a pertinent patent office under the Budapest Treaty instructs ATCC to do so. The following questions must be answered

a. As of date of deposit or conversion to meet the requirements of the Budapest Treaty, do you wish the deposit made available to anyone who requests a culture? If yes, there are no restrictions on distribution. Yes _____ No X

b. As of date of deposit or conversion to meet the requirements of the Budapest Treaty, do you wish the deposit made available to requesters which satisfy Patent Offices in countries not signatory to the Budapest Treaty?

If "yes," please state which countries below. Yes _____ No X

Please note that if you are converting your deposit to meet the requirements of the Budapest Treaty, and your deposit has already been released for distribution due to the issuance of a U.S. Patent, you cannot restrict it from further distribution.

After a U.S. Patent issues, and we are so notified, ATCC makes the culture available to anyone who requests it, as allowed under U.S. Patent and Trademark Office Rules and Regulations (37 CFR § 1.808[a](2)).

Form BP/1 Page 1 of 2 Rev. 1/97

10. Do you wish ATCC to inform you of all requests for this strain? Yes X No _____

11. ATCC will notify you of your ATCC number after confirmation of viability testing is complete (No Charge).

Name of Individual to notify: Gregory L. Stahl

Fax No. Telephone No. 617/278-6957

12. Payment by check, or credit card (MasterCard, VISA or American Express), must accompany the deposit unless prior arrangements for billing have been made and approved. If arrangements have been made to bill you for services, please indicate person who should receive invoice. Also, please include P.O. number.

Purchase order # 2882

Please send invoice to: James A. Webber, Jr.
BWH Anesthesia Foundation
75 Francis Street
Boston, MA 02115

Credit Card number (indicate MasterCard, VISA,

or American Express) Expiration Date

#

Type or print the name shown on credit card Signature

DEC 07 1981 13:10

<http://www.atcc.org/forms/formbp1.htm>

For ATCC use only: Auth: _____ ROC
#: _____

13. Name, address, telephone and facsimile number of your attorney of record. (Ref: Docket or Case No. B0801 / 7130) (see attachment)

14. **MUST BE COMPLETED.** Deposited on behalf of: (Verify with your management who owns the deposit. The owner is usually a company or institute, and normally is not an individual.) Brigham and Women's Hospital

I understand and agree that the deposit may not be withdrawn by me for a period specified in Rule 9.1 of the Budapest Treaty (at least 30 years after the date of deposit or 5 years after the date of the most recent request for the deposit, whichever is longer), and that if a culture should die or be destroyed during the life of the patent, or the period of time so specified, it is my responsibility to replace it with a living culture of the same organism or cell. In the cases of viruses, cell cultures, plasmids, embryos, and seeds, it is my responsibility to supply a sufficient quantity for distribution for the period of time specified above.

Typed Name Signature Date Gregory L. Stahl
Address. Center for Experimental Therapeutics and Reperfusion Injury
Dept. of Anesthesia, Brigham & Women's Hospital, 75 Francis Street
Boston, MA 02115

THIS FORM MUST BE COMPLETED IN ENGLISH

ADDRESS SHIPMENTS AND FORM TO THE ATTENTION OF: Patent Depository

American Type Culture Collection

10801 University Blvd.

Manassas, VA 20110-2209 U.S.A.

ALL FEES SUBJECT TO CHANGE:

FEES: 30 years' storage \$600. 30 years' notification \$360. Viability testing \$100 to \$400 or quoted price, dependent upon necessary material and/or equipment. Prepare additional samples of cells or hybridomas \$500. Return sample for approval (if not submitted frozen or freeze-dried or the required number) \$130. Additional costs for return of samples outside U.S.A. **STORAGE:** Cultures are stored for 30 years from date of deposit or five years after the last request for a sample, whichever is longer, as required under the rules of patent offices in most countries.

ATCC USE ONLY: ATCC DESIGNATION _____ REC'D _____ V.T. RESULT _____

Name of Deposit _____ Strain Designation _____

Budapest Treaty Deposits**American Type Culture Collection**

10801 University Blvd, Manassas, VA 20110-2209 Tel (703) 365-2700; Fax (703) 365-2745

**TO DEPOSIT OR TO CONVERT A DEPOSIT TO MEET THE REQUIREMENTS OF BUDAPEST TREATY ON THE
INTERNATIONAL RECOGNITION OF THE DEPOSIT OF MICROORGANISMS FOR THE
PURPOSES OF PATENT PROCEDURE****ALL QUESTIONS MUST BE COMPLETED. PLEASE USE ONE FORM PER EACH STRAIN DEPOSITED.**

1. Name of deposit. (If microorganism, complete scientific name including genus and species and source of material; If virus, name and whether or not plant or animal and source including geographic location; if cell line, provide tissue & species, geographical source of isolation and any known hazards associated (e.g. HIV, EBV, etc.); if genetic materials, name of organism from which vector, clone or library is derived, source of the DNA insert identified by species (e.g. human, mouse) or scientific name and provide name of gene and identity of the host organism.)

hMBL1.2 - mouse anti-human mannose binding lectin antibody

2. Strain designation (i.e., number, symbols, etc.) hMBL1.2

*The strain designation must correspond with the vial labels.

3. Is this an original deposit under the Budapest Treaty? Yes

4. Is this a request for a conversion of a deposit already at the ATCC to meet the requirements of the Budapest Treaty? If so, please indicate ATCC designation. No

5. Is this deposit a mixture of microorganisms or cells? No

6. Provide details necessary to cultivate, test for viability and store deposit. If mixture, provide description of components and a method to check presence. (If plasmid, provide name of host & antibiotic resistance) See attachment

7. Provide sufficient description so that ATCC may confirm deposit properties (e.g. Gram negative rod) Mouse IgG1k

a. If deposit is a cell culture, is it being cultured in the presence of antibiotics? If so, please list the antibiotics

b. If deposit is hybridoma, what is the isotype of antibody produced? IgG1k

8. Is this strain hazardous to humans? No animals? No plants? No If yes, what is the recommended biosafety

level for working with this strain _____ (Re: Guidelines for Research Involving Recombinant DNA Molecules, NIH Guidelines, January 1996) [www.nih.gov/od/orda/toc.htm]

9. Availability: Prior to issuance of a U.S. Patent, ATCC will only make a culture available as instructed by the depositor or relevant patent office. Samples must be provided to a specific investigator if a pertinent patent office under the Budapest Treaty instructs ATCC to do so. The following questions must be answered:

a. As of date of deposit or conversion to meet the requirements of the Budapest Treaty, do you wish the deposit made available to anyone who requests a culture? If yes, there are no restrictions on distribution. Yes _____ No X

b. As of date of deposit or conversion to meet the requirements of the Budapest Treaty, do you wish the deposit made available to requesters which satisfy Patent Offices in countries not signatory to the Budapest Treaty?

If "yes," please state which countries below. Yes _____ No X

Please note that if you are converting your deposit to meet the requirements of the Budapest Treaty, and your deposit has already been released for distribution due to the issuance of a U.S. Patent, you cannot restrict it from further distribution.

After a U.S. Patent issues, and we are so notified, ATCC makes the culture available to anyone who requests it, as allowed under U.S. Patent and Trademark Office Rules and Regulations (37 CFR § 1.808 [a](2)).

Form BP/1 Page 1 of 2 Rev. 1/97

10. Do you wish ATCC to inform you of all requests for this strain? Yes X No _____

11. ATCC will notify you of your ATCC number after confirmation of viability testing is complete (No Charge).

Name of Individual to notify: Gregory L. Stahl

Fax No. Telephone No. 617/278-6957

12. Payment by check, or credit card (MasterCard, VISA, or American Express), must accompany the deposit unless prior arrangements for billing have been made and approved. If arrangements have been made to bill you for services, please indicate person who should receive invoice. Also, please include P.O. number

Purchase order # 2882

Send Invoice to: James A. Webber, Jr.
BWH Anesthesia Foundation
75 Francis Street
Boston, MA 02115

Credit Card number (indicate MasterCard, VISA,

or American Express) Expiration Date

#

Type or print the name shown on credit card Signature

For ATCC use only: Auth: _____ ROC
#: _____

13. Name, address, telephone and facsimile number of your attorney of record (Ref: Docket or Case No.)
B0801 / 7130 (see attachment)

14. **MUST BE COMPLETED.** Deposited on behalf of: (Verify with your management who owns the deposit. The owner is usually a company or institute, and normally is not an individual.)

Brigham and Women's Hospital

I understand and agree that the deposit may not be withdrawn by me for a period specified in Rule 9.1 of the Budapest Treaty (at least 30 years after the date of deposit or 5 years after the date of the most recent request for the deposit, whichever is longer), and that if a culture should die or be destroyed during the life of the patent, or the period of time so specified, it is my responsibility to replace it with a living culture of the same organism or cell. In the cases of viruses, cell cultures, plasmids, embryos, and seeds, it is my responsibility to supply a sufficient quantity for distribution for the period of time specified above.

Typed Name Signature Date Gregory L. Stahl

Address.

Center for Experimental Therapeutics and Reperfusion Injury,
Dept. of Anesthesia, Brigham & Women's Hospital, 75 Francis Street
Boston, MA 02115

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Manassas, VA 20110-2209 U.S.A.

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FEES: 30 years' storage \$600. 30 years' notification \$360. Viability testing \$100 to \$400 or quoted price, dependent upon necessary material and/or equipment. Prepare additional samples of cells or hybridomas \$500. Return sample for approval (if not submitted frozen or freeze-dried or the required number) \$130. Additional costs for return of samples outside U.S.A. **STORAGE:** Cultures are stored for 30 years from date of deposit or five years after the last request for a sample, whichever is longer, as required under the rules of patent offices in most countries.

ATCC USE ONLY: ATCC DESIGNATION _____ REC'D _____ V.T. RESULT _____

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Budapest Treaty Deposits**American Type Culture Collection**

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TO DEPOSIT OR TO CONVERT A DEPOSIT TO MEET THE REQUIREMENTS OF BUDAPEST TREATY ON THE
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PURPOSES OF PATENT PROCEDURE

ALL QUESTIONS MUST BE COMPLETED. PLEASE USE ONE FORM PER EACH STRAIN DEPOSITED.

1. Name of deposit. (If microorganism, complete scientific name including genus and species and source of material; If virus, name and whether or not plant or animal and source including geographic location; if cell line, provide tissue & species, geographical source of isolation and any known hazards associated (e.g. HIV, EBV, etc.); if genetic materials, name of organism from which vector, clone or library is derived, source of the DNA insert identified by species (e.g. human, mouse) or scientific name and provide name of gene and identity of the host organism.)

2A9 Hybridoma - Mouse anti-human mannose binding lectin antibody

2. Strain designation (i.e., number, symbols, etc). 2A9

The strain designation must correspond with the vial labels.

3. Is this an original deposit under the Budapest Treaty? Yes

4. Is this a request for a conversion of a deposit already at the ATCC to meet the requirements of the Budapest Treaty? If so, please indicate ATCC designation. No

5. Is this deposit a mixture of microorganisms or cells? No

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7. Provide sufficient description so that ATCC may confirm deposit properties (e.g. Gram negative rod). Mouse IgG1k isotype

a If deposit is a cell culture, is it being cultured in the presence of antibiotics? If so, please list the antibiotics

b If deposit is hybridoma, what is the isotype of antibody produced? IgG1k

8. Is this strain hazardous to humans? No , animals? No , plants? No If yes, what is the recommended biosafety

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Form BP/1 Page 1 of 2 Rev. 1/97

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Name of Individual to notify: Gregory L. Stahl

Fax No. Telephone No. 617/278-6957

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Purchase order # 2882

Send invoice to: James A. Webber, Jr.
BWH Anesthesia Foundation
75 Francis Street
Boston, MA 02115

Credit Card number (indicate MasterCard, VISA,

or American Express) Expiration Date

#

Type or print the name shown on credit card Signature

For ATCC use only: Auth: _____

ROC

#:

13. Name, address, telephone and facsimile number of your attorney of record (Ref: Docket or Case No.
B0801 / 7130 (see attachment)

14. **MUST BE COMPLETED.** Deposited on behalf of: (Verify with your management who owns the deposit. The owner is usually a company or institute, and normally is not an individual.)

Brigham and Women's Hospital

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Typed Name Signature Date Gregory L. Stahl

Address.

Center for Experimental Therapeutics and Reperfusion Injury,
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Boston, MA 02115

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Manassas, VA 20110-2209 U.S.A.

ALL FEES SUBJECT TO CHANGE:

FEES: 30 years' storage \$600. 30 years' notification \$360. Viability testing \$100 to \$400 or quoted price, dependent upon necessary material and/or equipment. Prepare additional samples of cells or hybridomas \$500. Return sample for approval (if not submitted frozen or freeze-dried or the required number) \$130. Additional costs for return of samples outside U.S.A. **STORAGE:** Cultures are stored for 30 years from date of deposit or five years after the last request for a sample, whichever is longer, as required under the rules of patent offices in most countries

ATCC USE ONLY: ATCC DESIGNATION _____ REC'D _____ V.T. RESULT _____

Name of Deposit _____ Strain Designation _____

ATCC

10801 University Blvd • Manassas, VA 20110-2209 • Telephone: 703-365-2700 • FAX: 703-

BUDAPEST TREATY ON THE INTERNATIONAL RECOGNITION OF THE DEPOSIT OF MICROORGANISMS FOR THE PURPOSES OF PATENT PROCEDURE

INTERNATIONAL FORM

RECEIPT IN THE CASE OF AN ORIGINAL DEPOSIT ISSUED PURSUANT TO RULE 7.3
AND VIABILITY STATEMENT ISSUED PURSUANT TO RULE 10.2

To: (Name and Address of Depositor or Attorney)

Brigham & Women's Hospital
Attn: Gregory L. Stahl
Dept. of Anesthesia, 75 Francis Street
Boston, MA 02115

Deposited on Behalf of: Brigham and Women's Hospital

Identification Reference by Depositor:

ATCC Designation

Mouse hybridoma hMBL1.2

HB-12619

Mouse hybridoma 2A9

HB-12620

Mouse hybridoma 3F8

HB-12621

The deposits were accompanied by: a scientific description a proposed taxonomic description indicated above. The deposits were received December 16, 1998 by this International Depository Authority and have been accepted.

AT YOUR REQUEST: X We will inform you of requests for the strains for 30 years.

The strains will be made available if a patent office signatory to the Budapest Treaty certifies one's right to receive, or if a U.S. Patent is issued citing the strains, and ATCC is instructed by the United States Patent & Trademark Office or the depositor to release said strains.

If the cultures should die or be destroyed during the effective term of the deposit, it shall be your responsibility to replace them with living cultures of the same.

The strains will be maintained for a period of at least 30 years from date of deposit, or five years after the most recent request for a sample, whichever is longer. The United States and many other countries are signatory to the Budapest Treaty.

The viability of the cultures cited above was tested January 20, 1999. On that date, the cultures were viable.

International Depository Authority: American Type Culture Collection, Manassas, VA 20110-2209 USA.

Signature of person having authority to represent ATCC:

Barbara M. Hailey
Barbara M. Hailey, Administrator, Patent Depository

Date: January 21, 1999

cc: Helen Lockhart (Ref. B0801/7130)